

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL

OMB Number:

Expires:

3235-0076 May 31, 2005

Estimated average burden

hours per response16.00



A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer Name of Issuer ([] check if this is an amendment and name has changed, and indicate change.) n²systems, Inc Address of Executive Offices (Number and Street, City, State, Zip Code) 7807 146th Place SE, Newcastle, WA 98059 Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) Brief Description of Business Provider of IT infrastructure products and services Type of Business Organization [X] corporation [] limited partnership, already formed [] other (please specify): [] business trust [] limited partnership, to be formed Month Year Actual or Estimated Date of Incorporation or Organization: [11] [06] [X] Actual [] Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:	Name of Offering ([] check if this is an amendment and name has chang	ged, and indicate cl	hange.)		
A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer Name of Issuer ([] check if this is an amendment and name has changed, and indicate change.) n²systems, Inc Address of Executive Offices (Number and Street, City, State, Zip Code) 7807 146th Place SE, Newcastle, WA 98059 Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) Brief Description of Business Provider of IT infrastructure products and services Type of Business Organization [X] corporation [] limited partnership, already formed [] other (please specify): [] limited partnership, to be formed Month Year Actual or Estimated Date of Incorporation or Organization: [11] [06] [X] Actual [] Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:	n ² systems, Inc 2007 Common Stock Issuance				
A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer Name of Issuer ([] check if this is an amendment and name has changed, and indicate change.) n²systems, Inc Address of Executive Offices (Number and Street, City, State, Zip Code) (425) 356-7557 Address of Principal Business Operations (Number and Street, City, State, Zip Code) (425) 356-7557 Address of Principal Business Operations (Number and Street, City, State, Zip Code) (10 different from Executive Offices) Brief Description of Business Provider of IT infrastructure products and services Type of Business Organization [X] corporation [] limited partnership, already formed [] other (please specify): [] business trust [] limited partnership, to be formed Actual or Estimated Date of Incorporation or Organization: [11] [06] [X] Actual [] Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:	Filing Under (Check box(es) that apply): [] Rule 504	[] Rule 505	[X] Rule 506	[]Section 4(6)	[]ULOE
Name of Issuer ([] check if this is an amendment and name has changed, and indicate change.) n²systems, Inc Address of Executive Offices (Number and Street, City, State, Zip Code) 7807 146th Place SE, Newcastle, WA 98059 Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) Brief Description of Business Provider of IT infrastructure products and services Type of Business Organization [X] corporation [] limited partnership, already formed [] other (please specify): [] business trust [] limited partnership, to be formed Month Year Actual or Estimated Date of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:	Type of Filing: [X] New Filing [] Amendment			-	10 TO
Name of Issuer ([] check if this is an amendment and name has changed, and indicate change.) n²systems, Inc Address of Executive Offices (Number and Street, City, State, Zip Code) (425) 356-7557 Address of Principal Business Operations (Number and Street, City, State, Zip Code) (425) 356-7557 Address of Principal Business Operations (Number and Street, City, State, Zip Code) (100	A. BASIC IDE	ENTIFICATION	DATA	PROCE:	33EU
Address of Executive Offices (Number and Street, City, State, Zip Code) 7807 146th Place SE, Newcastle, WA 98059 Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) Brief Description of Business Provider of IT infrastructure products and services Type of Business Organization [X] corporation [] limited partnership, already formed [] other (please specify): [] business trust [] limited partnership, to be formed Month Year Actual or Estimated Date of Incorporation or Organization: [11] [06] [X] Actual [] Estimated Jurisdiction of Incorporation for State:	Enter the information requested about the issuer			$\sqrt{MAR 19}$	2007
Address of Executive Offices (Number and Street, City, State, Zip Code) 7807 146th Place SE, Newcastle, WA 98059 Address of Principal Business Operations (if different from Executive Offices) Brief Description of Business Provider of IT infrastructure products and services Type of Business Organization [X] corporation [] limited partnership, already formed [] limited partnership, to be formed Month Year Actual or Estimated Date of Incorporation or Organization: [11] [06] [X] Actual [] Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:	Name of Issuer ([] check if this is an amendment and name has change	d, and indicate cha	inge.)	M	
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Brief Description of Business Provider of IT infrastructure products and services Type of Business Organization [X] corporation [] limited partnership, already formed [] limited partnership, to be formed Month Year Actual or Estimated Date of Incorporation or Organization: [I] Estimated Genter two-letter U.S. Postal Service abbreviation for State:	n ² systems, Inc			1//	NI
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Brief Description of Business Provider of IT infrastructure products and services Type of Business Organization [X] corporation [] limited partnership, already formed [] limited partnership, to be formed Month Year Actual or Estimated Date of Incorporation or Organization: [I] Estimated Genter two-letter U.S. Postal Service abbreviation for State:		State, Zip Code)	Telephone Number	(Including Alea Cod	fal
(if different from Executive Offices) Brief Description of Business Provider of IT infrastructure products and services Type of Business Organization [X] corporation [] limited partnership, already formed [] business trust [] limited partnership, to be formed Month Year Actual or Estimated Date of Incorporation or Organization: [11] [06] [X] Actual [] Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:	7807 146th Place SE, Newcastle, WA 98059			FINANC	
Brief Description of Business Provider of IT infrastructure products and services Type of Business Organization [X] corporation [] limited partnership, already formed [] business trust [] limited partnership, to be formed Month Year Actual or Estimated Date of Incorporation or Organization: [11] [06] [X] Actual [] Estimated Jurisdiction of Incorporation for State:	Address of Principal Business Operations (Number and Street, City,	State, Zip Code)	Telephone Number	(Including Area Cod	e)
Provider of IT infrastructure products and services Type of Business Organization [X] corporation [] limited partnership, already formed [] other (please specify): [] business trust [] limited partnership, to be formed Month Year Actual or Estimated Date of Incorporation or Organization: [11] [06] [X] Actual [] Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:	(if different from Executive Offices)				
Provider of IT infrastructure products and services Type of Business Organization [X] corporation [] limited partnership, already formed [] other (please specify): [] business trust [] limited partnership, to be formed Month Year Actual or Estimated Date of Incorporation or Organization: [11] [06] [X] Actual [] Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:			<u> </u>		
Type of Business Organization [X] corporation [] limited partnership, already formed [] other (please specify): [] business trust [] limited partnership, to be formed Month Year Actual or Estimated Date of Incorporation or Organization: [11] [06] [X] Actual [] Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:	·				
[X] corporation [] limited partnership, already formed [] other (please specify):	<u> </u>				
[] business trust [] limited partnership, to be formed Month Year Actual or Estimated Date of Incorporation or Organization: [11] [06] [X] Actual [] Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:	·· ·			63.4.4.1	10.3
Month Year Actual or Estimated Date of Incorporation or Organization: [11] [06] [X] Actual [] Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:					ecity):
Actual or Estimated Date of Incorporation or Organization : [11] [06] [X] Actual [] Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:	······································	•			
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:	-				
	1 5				[] Estimated
COLD CO. I TOLD C.					
CN for Canada; FN for foreign jurisdiction) [WA]	CN for Canada;	FN for foreign jur	nsdiction)		[WA]

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.



OHS WEST:260185145.1

18584-1 EJW

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - · Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition, of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

	· · · · · · · · · · · · · · · · · · ·					
Check Box(es) that Apply:	[] Promoter [X] Beneficial Owner [] General and/or Managing Partner	[X] Executive Officer	[X] Director			
Full Name (Last name first, if individual) Alvarez, Harnan						
	umber and Street, City, State, Zip Code)					
c/o n ² systems, Inc., 7807 146th						
Check Box(es) that Apply:	[] Promoter [X] Beneficial Owner	[X] Executive Officer	[X] Director			
2 = 4()	[] General and/or Managing Partner					
Full Name (Last name first, if indi-						
Moore, Steven N.						
Business or Residence Address (N	umber and Street, City, State, Zip Code)					
6029 NE 35th Street, Kirkland, V						
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner [] General and/or Managing Partner	[] Executive Officer	[X] Director			
Full Name (Last name first, if indi-	vidual)					
· · · · · · · · · · · · · · · · · · ·	<u> </u>					
Business or Residence Address (N	umber and Street, City, State, Zip Code)					
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[] Director			
	[] General and/or Managing Partner					
Full Name (Last name first, if indi-	vidual)					
Business or Residence Address (N	umber and Street, City, State, Zip Code)	· · · · · · · · · · · · · · · · · · ·				
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[] Director			
	[] General and/or Managing Partner					
Full Name (Last name first, if indi-	vidual)					
Business or Residence Address (N	umber and Street, City, State, Zip Code)					
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner [] General and/or Managing Partner	[] Executive Officer	[] Director			
Full Name (Last name first, if indi-						
Tan Pane (Dan Hame mon, II mor	, round					
Business or Residence Address (N	umber and Street, City, State, Zip Code)					
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner [] General and/or Managing Partner	[] Executive Officer	[] Director			
Full Name (Last name first, if indiv						
Business or Residence Address (N	umber and Street, City, State, Zip Code)					
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner [] General and/or Managing Partner	[] Executive Officer	[] Director			
Full Name (Last name first, if indiv		* *************************************	<u>-</u>			
Business or Residence Address (Number and Street, City, State, Zip Code)						
(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)						

B. INFORMATION ABOUT OFFERING					
Yes N 1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?					
2. What is the minimum investment that will be accepted from any individual? \$_N/A					
Yes N 3. Does the offering permit joint ownership of a single unit?	lo]				
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) person be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. NONE	is to				
Full Name (Last name tirst, if individual)					
Business or Residence Address (Number and Street, City, State, Zip Code)					
Name of Associated Broker or Dealer					
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers					
(Check "All States" or check individual States)					
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID]					
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] MI] [MN] MS] [MO] [MT] [NE] [NV] [NH] [NY] [NC] [ND] [OH] [OK] [PA]					
[RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR] Full Name (Last name first, if individual)					
Business or Residence Address (Number and Street, City, State, Zip Code)					
Name of Associated Broker or Dealer					
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers					
(Check "All States" or check individual States) [] All States					
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]					
Full Name (Last name first, if individual)					
Business or Residence Address (Number and Street, City, State, Zip Code)					
Name of Associated Broker or Dealer					
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers					
(Check "All States" or check individual States)					
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]					
(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)					

SEC 1972 (1/94)

Enter the aggregate offering price of securities included in this offering and the total 1. amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box [] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Amount Already Type of Security Aggregate Offering Price Sold Debt 700 700(1) Equity [X] Common [] Convertible Securities (including warrants) Partnership Interests.... Other (specify) Notes and Warrants 700(1) 700 Total Answer also in Appendix, Column 3, if filing Under ULOE 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Dollar Amount Number of Investors of Purchases 700 Accredited Investors 0 0 Non-accredited Investors..... Total (for filings Under Rule 504 Only)..... Answer also in Appendix, Column 4 if filing under ULOE If this filing is for an offering Under Rule 504 or 505, enter the information requested 3. for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1. Dollar Amount Type of Type of offering Security Sold Rule 505 Regulation A Rule 504..... Total a. Furnish a statement of all expenses in connection with the issuance and distribution 4 of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.. Transfer Agent's Fees....... n Legal Fees [] 0 Engineering Fees [0 0 0 (2) (1) The provision of past services was the consideration for the Common Stock. This dollar figure represents the current fair market value

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

SEC 1972 (1/94)

of the Common Stock issued.

(2) The expenses of this offering were not paid out of the proceeds of this offering.

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPE	NSES A	ND US	SE OF PROC	EEDS	
	b. Enter the difference between the aggregate offering price given in response to Part C – Question 1 and total expenses furnished in response to Part C – Question 4.a. This difference is the "adjusted gross proceeds to the issuer."				\$	700
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C – Question 4.b above.			to Officers, & Affiliates	Payr	nents To Others
	Salaries and fees	\$.	[]	\$	
	Purchase of real estate	s		[]	\$	
	Purchase, rental or leasing and installation of machinery and equipment []	\$		[]	\$	
	Construction or leasing of plant buildings and facilities	\$		[]	\$	
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets of securities of another issuer pursuant to a merger)	s		[]	S	
	Repayment of indebtedness	\$		[]	\$	
	Working capital	s		[X]	\$	700
	Other:[]	\$		[]	S	
	Column totals	\$		[X]	s	700
	Total payments listed (column totals added)	[X]	<u>\$</u>	700		
	D. FEDERAL SIGNATURE					
consti	sucr has duly caused this notice to be signed by the undersigned duly authorized person. If the tates an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission uer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.	his notice n, upon w	is filed u	inder Rule 505, quest of its staff,	the follow the inforn	ing signature nation furnished by
Issuer	(Print or Type) n²systems, Inc		7		Date	2/28/07
Name	of Signer (Print or Type) Title of Signer (Frint or Type) Hernan Alvarez President and		pe)	•		1 /

Attention

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

END